CITY OF ST. CHARLES, MISSOURI DEPARTMENT OF PUBLIC WORKS EXCAVATION PERMIT

Name and Address of Owner, Developer or Agent:	Name and Address of Party doing Work:
Phone #:Email:	Phone #:Email:
EMERGENCY CONTACT INFORMATION: Contact #1	Contact #2
Name:	Contact #2 Name:
Phone:	Phone:
After Hours Phone:	After Hours Phone:
Pager:	Pager:
Location and Description of Work:	
Quantities to be removed:	
Asphalt Pavement	Square Yards (1 Square Yard = 9 Square Feet)
Community Design and (Early Clabe)	[Square Yards = Length (ft) x Width (ft) / 9]
Concrete Pavement (Full Slabs)	
Excavated Soil	Cubic Yards (1 Cubic Yard = 27 Cubic Feet) [Cubic Yards = Length (ft) x Width (ft) x Depth (ft) / 27]
Sidewalk	G
all injuries, including death to persons or damage to property direct work described above. Permitee shall hold the City of St. Charles against the City of St. Charles for any loss, damage, or injury susta above. The Permitee also consents to allowing access and inspect Signature of Authorized Agent:	harmless from and shall answer and defend any action instituted ained by any person from the performance of the work described ion of the work by City employees.
Title:	
Manual of Uniform Traffic Control Devices or as directed by the	Works in writing. All Traffic Control shall be in accordance with the City Engineer. Through traffic shall be allowed during all ty Engineer. Maximum length of lane closures shall be 4 days and 7
Owner/Contractor is to notify the Public Works Dept. at (636) 949 the City may result in rejection of the work and non-acceptance of Construction Specifications. Copies of the specifications are avail Deposits will be held for 90 days after work is complete . The crelease of the deposit. All City requirements must be met in order	the improvements. All work is to conform to the City's lable for \$10 each through the Department of Public Works. contractor is responsible for requesting the final inspection and
This permit must be on the job site at all times and will expire in $\underline{3}$	30 days unless noted otherwise.
Section Below is for City Use Only:	
Permit Fee: \$ Date Paid: [Code Section § 505.440.A.10]	
Security/Escrow/Deposit Amount:	(Cashier's Check or Certified Check)
Annual \$10,000 Excavation Performance Bond on file with Do restorations exceed \$10,000?: (Yes / No) \$50,000 Liability Insurance Certificate or Bond submitted?:	
Application (Approved / Denied) by:	Date:
Public Works Departm Permit Expires:	ent
Special Conditions:	